

**DISABILITY DETERMINATION SERVICES
ADVISORY COUNCIL
ANNUAL REPORT
2006-2007**

Executive Summary

This report provides a summary of the major activities of the DDS Advisory Council for the 2006-2007 operating year. The Council continued in its primary roles of advisement, support, and Council oversight of DDS operations through regular meetings, committee meetings, and ongoing communication between the Council Executive and DDS administrative personnel.

Recommendations for the year 2005-2006 from the last annual report were:

1. *Continue public outreach and education and documenting training/education events as we have done in the past.*

Outcome: Gordon Richins received several phone calls throughout the year regarding SSA questions. He also spoke to two USU classes and one peer support group for individuals with disabilities. Regarding SSA and DDS programs and procedures.

Contacts made by:

Barrie Nielson: individual contacts - 120, people in groups - 180

Matt Nielson: Individual contacts - 100, service providers - 12,
People in groups - 50

2. *Review the new Regulations for the Disability Process Improvements when they are issued by SSA and providing any appropriate feedback. This is anticipated sometime after May 2006.*

Outcome: Although the actual regulations were available, Gary has been briefing the Council in more operational terms of the changes and the practical potential impacts on the DDS and processing of disability claims. The DSI changes were first implemented in the Boston Region in August 2006 with the plan to extend implementation to the Denver Region in August of 2007 after initial implementation problems were addressed.

With the new Commissioner of Social Security taking Office in February 2007, there has been an indication that there will be some modifications in DSI which has not yet been released.

3. *Review and update the Council By-Laws. Last revised; 1999.*

Outcome: Gordon shared the Council By-Laws for review and suggestions on possible changes that may be necessary since the last revision, in 1999. This item will be carried over until the following year when new Council members have the opportunity for input.

4. *Review and update the new Council Member Orientation manual.*

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Outcomes: This item will be carried over until the following year when new Council members have the opportunity for input.

5. *On-going education of Council Members regarding disability programs and issues through guest speakers regarding different parts of the disability program including Council Member affiliations and agencies, DDS functions such as Consultants or Examiners, Office of Hearings and Appeals, Field Office operations, etc.*

Outcomes: *From the minutes,*

At the July 14, 2006 Council meeting, Dr. Taggart and John Fryer conducted a discussion on DMA for Council members allowing time for questions. John Fryer, an examiner, has been with the agency for over two years and started DMA on August 15, 2005. He described some changes and differences of processing a paper claim as compared to an electronic claim. A major issue John noted was the time it took for screen changes, and in the increased time it took to review lengthy medical evidence page by page. He saw positives and negatives in the electronic process. Dr. Taggart was one of the first medical consultants to try DMA. He developed a how-to guide for consultants, which is still being used for reminders and also for training purposes. Dr. Taggart also noted that time it took to open up pages.

At the September 8, 2006 meeting, the Council watched a DSI, Disability Service Improvements video about the new changes that will begin for the Utah DDS in December, 2006 and a fully implemented, by August, 2007. Among changes noted in the video was the elimination of the reconsiderations step for the DDS. Reconsideration will be performed by a Federal Attorney. A Quick Decision Unit will be formed within the DDS to make decisions of clear allowances within 20 days.

At the December 8, 2006 Council meeting Gary shared information and numbers on a visit to the Idaho DDS offices. Gary felt this was a very positive experience. Their agency has a very low examiner turnover. Utah has a very high turnover rate in comparison to Idaho. Proposed changes to the Utah DDS Examiner pay plan may be structured after the Idaho model of starting one step below the midpoint pay range. A Utah State Market Comparability study showed that the Examiner pay range was below market level. Several other productivity items were identified to DDS council members as comparisons between Utah and Idaho DDS systems.

At the February 9, 2007, Council meeting, Gary shared a copy of A Limited Review of Disability Determination Services, Report Number 2007-05, and February 2007, which had just been released by the Office of the Legislative Auditor General. Gary had advised the Council that this Audit began in October 2006 based upon a request by members of the Interim Health and Human Services Subcommittee of the Legislature. The concern was on the excessively long processing times for our DDS adjudicating claims and for alleged low allowance rates as it related to the budget shortfall in the General Assistance Budget of the Department of Workforce Services. Gary reviewed the three recommendations of the Audit which included:

- Continue to increase the electronic collection of claimant medical records.
- Improve the monitoring of claims to ensure that aged claims are being processed and not neglected.
- Communicate to DWS (Department of Workforce Services).

Gary reported that he agreed with all of the recommendations and that the DDS had been actively working on all three of these areas even before the Audit.

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Overview of Council Activities

The Advisory Council is comprised of persons from a range of constituent groups, including consumers, healthcare professionals, and representatives from agencies who provide services to consumers with disabilities. The Council meets on a regular basis in order to perform its primary functions of advisement, support, and oversight of Disability Determination Services (DDS) operations. Council members also serve as a conduit to the community by disseminating information concerning the rights of consumers with respect to DDS services. The Council has an excellent relationship with SSA nonvoting members that attend Council meetings which enhances overall Council activities and communications.

The Council meets on an every other month schedule, with meetings in January, March, May, July, September and November. Due to a federal holiday landing on the second Friday of November 2006, the Council met in December 2006. The Council will revert back to the original monthly schedule with the meeting time remaining the same 11:00 a.m. on the second Friday of every other month. Additional Council work is done by sub-committees between meetings.

Council Membership Changes for 2006-2007

In May, Matt Nielsen and Mitzi Cheney agreed to fill additional four-year terms. Approval by the Council was unanimous. Also in May, Marsha Rawlins was unanimously approved as a new Council member. Marsha had been serving as an alternate Council member. In December, Vanya Mabey was introduced as a prospective member of the Council. She is employed at the Utah Department of Health as a Consultant and Technical Advisor for the Baby Watch Early Intervention Program and Children with Special Help Care Needs. A motion to accept her to this position was scheduled for a meeting when a quorum is present. Vanya Mabey was approved by a vote at the February 9, 2007 meeting and has been submitted to the Executive Director of USOR to be forwarded to the State Board of Education for approval. Jeff Sheen was moved to an alternate position due to a conflict with Friday meetings. He has asked if he could continue to receive the meeting minutes and administrative reports. He finds keeping up with the DDS activities enhances his research activities at the CPD. It would also allow him to become a full member if meeting times change in the future.

Council Member Education

Council member education is a priority and conducted throughout the year. The Council is fortunate to have both Gary and Paul provide us with ongoing education in the area of the day to day workings of DDS. At each meeting Gary provides the Council with his Administrator's report, which provides the Council with valuable information.

Performance Review and Acknowledgement

Of special interest to the Council are the Administrator's Reports that are distributed at every Council meeting. These reports give the Council insight into national issues as well as local issues that affect the constituency of the Council. The main concerns coming from the Administrator's Reports and how they affect the DDS are as follows:

Staff Retention:

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Staff turnover generally and loss of examiners specifically has been concerning with its effect on case turnaround. This also applies to the turnover in Medical Consultants. Gary felt very positive after returning from Idaho and the review of their DDS system. Gary pointed out several examples from the Idaho office that may help Utah's DDS office retain examiners and medical consultants. As mentioned earlier, the Idaho pay scale was different, but identified the discrepancy in wages between Utah and Idaho.

The Utah State Legislative Audit, Report Number 2007-05, February 2007, discussed earlier stated that the “DDS has experienced high examiner turnover the last few years.” The Audit Report also stated that:

“Many factors can contribute to high employee turnover. We sent a questionnaire to nine former Utah DDS employees, and six responded. All six reported that salary was a primary reason for leaving DDS employment; some also stated that low employee morale was also a factor. To address the issue of employee turnover, Utah DDS is working with the Utah State Office of Education to help increase base pay for examiners to help with employee retention.”

In August 2006, the HR Director and our Executive Director approved a Retention Plan which gave 2 steps to those examiners below the mid-point of the range and 1 step to those examiners who were at or above mid-point. Each step is approximately 2.75%. All positions such as technicians and management who were benchmarked to the examiner position were also part of the Retention Plan. Additionally, also in August 2006, the production bonus for an examiner was increased from \$2000 to \$3500. This equates to a potential increase of 3.8%. In February 2007, The HR Director and our Executive Director approved a dramatic 13.7% increase in examiner pay ranges to equate to the findings of the State Market Comparability study for 2006 which found that the Examiner III pay range was 13.7% below market. Additionally, the production incentive for examiners was increased to a limit of \$3900 which added another 1% potential increase. The Council is very pleased with this dramatic progress in examiner salaries as we have been advocating for this since the creation of the Advisory Council in 1994. We will be watching with interest to see if the examiner turnover decreases over time.

The Five-Step Increase for Examiners, in our conservative personnel and salary system in Utah, being able to give five steps at one time is very unusual. This equates to about a 13.7% increase in salary for all examiners. The great thing about this once-in-a-lifetime opportunity was that we could were able to give it to all of our staff, who met the requirements (satisfactory performance). In August 2006, we had already given a 1 to 2 step increase to examiners depending upon whether they were below market for the position. They Legislative Audit Report actually helped our HR Director and Executive Director to approve this large increase. We are really hoping that this increase will decrease our examiner turn over from its average 28% a year (8-9 examiners) to about half or a about, 4-5 examiners a year.

Because the large increase for examiners is so significant for our DDS, we would like to recognize our HR Director, Marlo Wilcox, and our Executive Director, Don Uchida, for supporting and advocating for this increase.

Backlog of Cases:

The following reasons contributed to the ongoing Backlog and Long Processing Times; DMA (productivity lost greater than 25% for the first year, 12% for the second year) **in FY 2006**, turnover in 2006 - 7 examiners, 2 management personnel, 3 Mental Consultant retirements, and a training model change.

Identified backlog;

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October 3, 2006: 1138 total (108 initials, 230 CDRs, 325 recons) December 2006: 119 total (108 initials, 7 CDRs, 4 recons) Thanks were given to the following programs for their assistance, Chicago Program Service Center, Disability Program Unit, North Dakota DDS, South Dakota DDS, and Idaho DDS.

Aged Cases Continues as Major Focus. As of 12/29/06, we had 701 cases over 125 days old with 221 (125-149), 104 (150-174) and 376 (175+). As of 2/23/07, we had 451 cases over 125 days old with 162 (125-149), 106 (150-174) and 183 (175+). Since December 29, 2006, we have had an overall 36% reduction in our cases over 125 days and a 51% reduction in our 175+ cases. Our agency goal is to eliminate our 125+ day old cases by the end of March 2007 with an emphasis on our 300+ day old cases.

DMA: DMA (Data Management Architecture).

The Council has continued to receive many updates on the status of DMA. Utah's DDS has significant advantages due to their strong systems and implementation staff. Initially significantly more time was needed because examiners had to learn the new electronic system but also continue to do paper cases. Examiners are gaining more experience with using the electronic version as time goes on.

Acknowledgment:

The Advisory Council would like to acknowledge Gary Nakao and Paul Clingo for their strong commitment to the Council. The Council is very grateful for their efforts to keep it informed of issues and their willingness to work with the Council to make DDS even better. It is the opinion the Council that the Salt Lake DDS is run very well and works extremely hard to accomplish its goals.

Council Acknowledgement:

Mark Smith has done an excellent job as the Utah DDS Council Chair. The Council would like to thank Mark for his hard work and leadership and commitment to the Utah DDS system.

RECOMMENDATIONS

2007-2008

- Continue public outreach and education and documenting training/education events as we have done in the past.
- Review the implementation of Disability Service Improvements throughout the year and provide any appropriate feedback.
- Periodic updates on the Recommendations of the Legislative Audit.
- Review and update the Council By-Laws.
- Review and update the new Council Member Orientation manual.
- On-going education of Council Members regarding disability programs and issues through guest speakers regarding different parts of the disability program including Council Member affiliations and agencies, DDS functions such as Consultants or Examiners, Office of Hearings and Appeals, Field Office operations, etc.

Attachment: A:

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Medical Relations Officer relating to the SOAR training, these trainings were done by Dave Carlson.

SOAR Training I assisted with from 6/2006 to current:

6/15/06 and 6/16/06 in Ogden Utah (approximately 30 participants)

8/3/06 and 8/4/06 in St. George Utah (approximately 30-35 participants)

9/15/06 in Provo Utah on 1550 N. Freedom Blvd. (approximately 35 participants)

11/21/06 in Roy Utah at DWS (approximately 30 employment counselors and clinicians)

3/1/07 in Provo DWS (approximately 30 participants)

3/16/07 in Ogden at Ogden Regional Center (approximately 25 DWS employment counselors)

I also gave 2 hours of DDS training on 7/27/07 with DWS/DDS/SSA at the DWS on Redwood Road. (approximately 25 participants)

Additionally, I gave a one hour DDS Sequential Evaluation Training at DWS in 10/06 at DWS on 158 South 200 West in Salt Lake City with approximately 10 participants including 3-4 DWS employees in the new SSA/DDS disability unit. Finally, I gave another one hour training at DWS on 1415 S. Main location in Salt Lake City in 10/06 to approximately 20 participants.

In January 2007 I and others from DDS trained the Veterans Administration employees how to use ERE and the DDS/SSA Standard Summary. Since that training, Kynda, Peter and myself have had to go back to the VA several times to test the system and try to fix the issues that were created. Peter went to the VA again this week and he feels he knows what the problem has been so it can be fixed this problem and allow DDS to receive MER from the Utah VA.

On 12/19/06 I visited the University of Utah Medical Center to once again ask them to use ERE to send MER to DDS. According to Al Tokunaga the records director, UMC is developing a physicians order to develop electronic transfer of records. This process may be completed by 8/2007. Currently, UMC only allows faxing of records to physicians with direct care. They do not have the resources right now to use the DDS secured fax. Approximately 1/2 of the records at UMC are paper and 1/2 are electronic records. Al said he supports DDS/SSA and the ERE process but UMC is not yet ready to use ERE. I have visited UMC two other times in the past and talked to Hau Le and one other medical records department supervisor and received the same response. I was given a referral from Rick North to contact his wife Kathy North who may be able to assist DDS. I was given the name of Nancy Brazelton, RN, MS to contact. Nancy is the director of clinical information services. Nancy told me this week about the same things I have heard from the other sources at UMC.

In 2/06, I contacted Breen Christensen from ChartOne. Through a long process, ChartOne now sends many of their records from several medical facilities by ERE and ConnectDirect. I am working with Segna from ChartOne to get all ChartOne facilities using ERE.

During the past 6 months I have contacted all CE providers to ask them to use ERE to send CE information to DDS. Approximately 92% of all CE's are being sent to DDS by ERE. Many are using the ERE secured web site but most are using the secured fax process. Johnsen Health Services are largest CE provider use the secured web site to transfer CE's to our office. We have trained another six CE providers to use the secured web site as well. Most want to use the secured fax process however.

In March 2007, I have been training with the SSA PAS (Sandy Hunter) to get schools to send school records through ERE. We meet with 8 teachers and administrators on 3/16 who are with the Weber School District at Canyon View School in Ogden. We also met with 15 teachers from the Ogden School District on 3/20/07. Sandy introduced the ERE process and I trained them all on the importance of completing the SSA teacher question form and why we need included in this report. We received good support from these two visits. Sandy and I will continue to meet with all school districts to get them to use ERE. I also want to visit other medical facilities to persuade them to use ERE.

The above sources are only the most current visits we have made since 1/2007.

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Current Members of the DDS Advisory Council

Voting Members

Mark Smith, Chairperson

Mitzi Cheney
Terra Jordan
Yolanda Kunder
Vanya Mabey
Barrie Nielson
Matthew Nielson
Marsha Rawlins
Gordon Richins

Alternate Member

Jeff Sheen

SSA Representative: Sandy Hunter

DDS Representatives: Gary Nakao and Paul Clingo

Council Secretary: Karen Houmand